

Health Insurance Program Monthly Report



Prepared for:

Kentucky Group Health Insurance
Board Members

June 2021

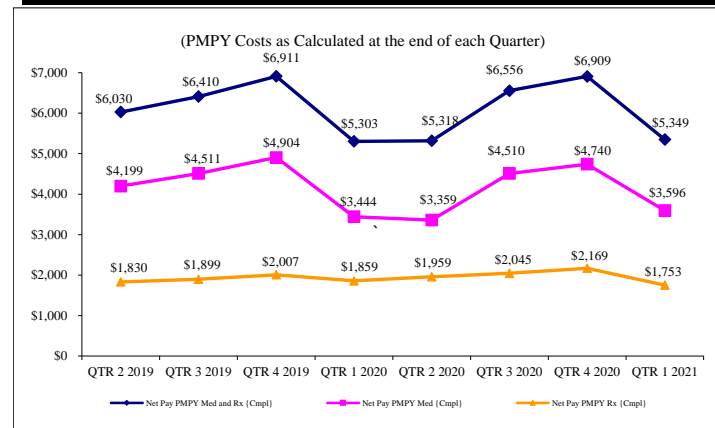
DASHBOARD REPORT: BASED ON INCURRED CLAIMS THROUGH JANUARY 2021

Includes Projections for Incurred, but Not Yet Reported (IBNR)

Enrollment

Fact	Feb 2019 - Jan 2020	Feb 2020 - Jan 2021	% Change
Employees Avg Med	143,154	141,845	-0.91%
Members Avg Med	263,840	264,158	0.12%
Family Size Avg	1.8	1.9	1.04%
Member Age Avg	36.7	36.6	-0.32%

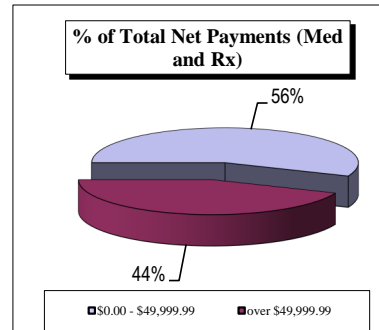
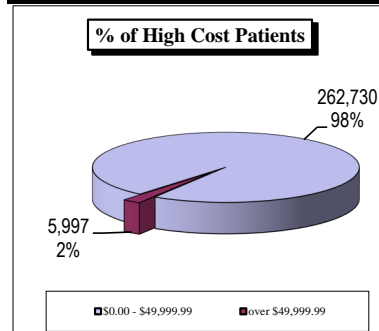
Net Incurred Claims Cost per Member



Allowed Claims Costs PMPY with Norms

	Feb 2019 - Jan 2020	Feb 2020 - Jan 2021	% Change	Recent US Norm	Comp to Norm
Allow Amt PMPY Med {Cmpl}	\$5,176.01	\$4,805.95	-7%	\$5,448.89	-13.38%
Allow Amt PMPY IP Acute {Cmpl}	\$1,430.37	\$1,247.84	-13%	N/A	N/A
Allow Amt PMPY OP Med {Cmpl}	\$3,731.06	\$3,548.60	-5%	\$3,911.00	-10.21%
Allow Amt PMPY OP Fac Med {Cmpl}	\$2,095.59	\$2,035.36	-3%	N/A	N/A
Allow Amt PMPY Office Med {Cmpl}	\$1,056.08	\$955.58	-10%	N/A	N/A
Allow Amt PMPY OP Lab {Cmpl}	\$239.77	\$256.97	7%	N/A	N/A
Allow Amt PMPY OP Rad {Cmpl}	\$500.30	\$466.89	-7%	N/A	N/A
Out of Pocket PMPY Med {Cmpl}	\$836.84	\$753.58	-10%	\$834.53	-10.74%
Allow Amt PMPY Rx {Cmpl}	\$2,082.46	\$2,245.20	8%	\$1,543.87	31.24%
Out of Pocket PMPY Rx {Cmpl}	\$213.53	\$230.63	8%	\$0.00	N/A

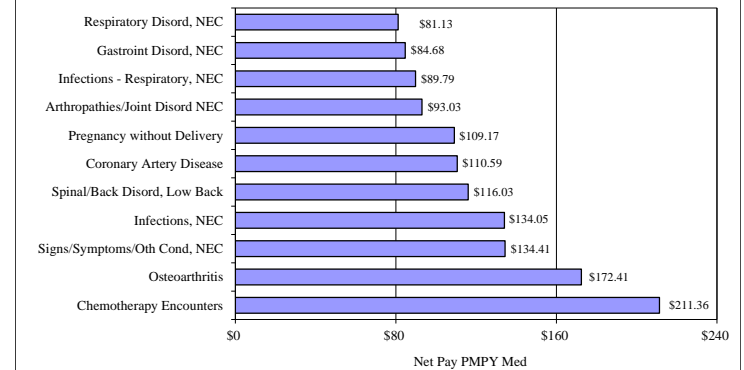
High Cost Claimants Feb 20—Jan 21



Prescription Drug Programs

	Fact	Feb 2019 - Jan 2020	Feb 2020 - Jan 2021	% Change
Mail Order	Discount Off AWP % Rx	55.29%	54.16%	-2.04%
	Scripts Generic Efficiency Rx	98.28%	98.40%	0.11%
Retail	Discount Off AWP % Rx	46.63%	44.28%	-5.03%
	Scripts Generic Efficiency Rx	98.57%	97.99%	-0.59%
Total	Discount Off AWP % Rx	50.01%	48.45%	-3.11%
	Scripts Generic Efficiency Rx	98.51%	98.09%	-0.42%
	Scripts Maint Rx % Mail Order	26.45%	29.88%	12.94%

Top 10 Clinical Conditions



Cost Drivers Support

Fact	Feb 2019 - Jan 2020	Feb 2020 - Jan 2021	% Change
Allow Amt Per Day Adm Acute	\$5,098.48	\$4,978.00	-2.36%
Days Per 1000 Adm Acute	279.94	245.62	-12.26%
Allow Amt Per Visit OP Fac Med	\$1,513.24	\$1,594.96	5.40%
Visits Per 1000 OP Fac Med	1,384.33	1,265.57	-8.58%
Allow Amt Per Visit Office Med	\$124.40	\$121.65	-2.21%
Visits Per 1000 Office Med	8,488.46	7,798.23	-8.13%
Allow Amt Per Day Supply Rx	\$3.45	\$3.69	6.89%
Days Supply PMPY Rx	603.76	608.95	0.86%

Cost Drivers—Utilization and Price Trends

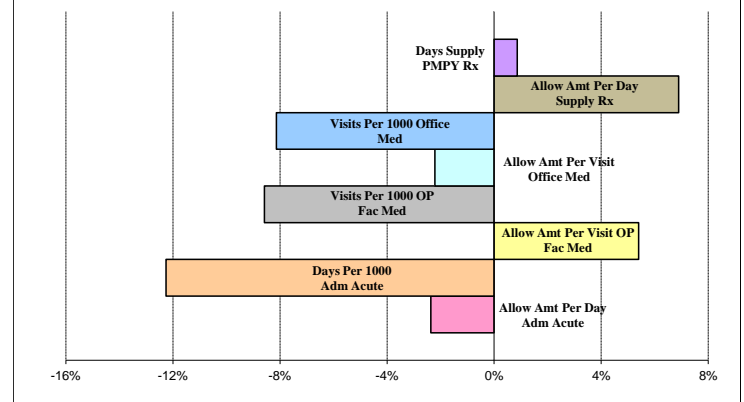


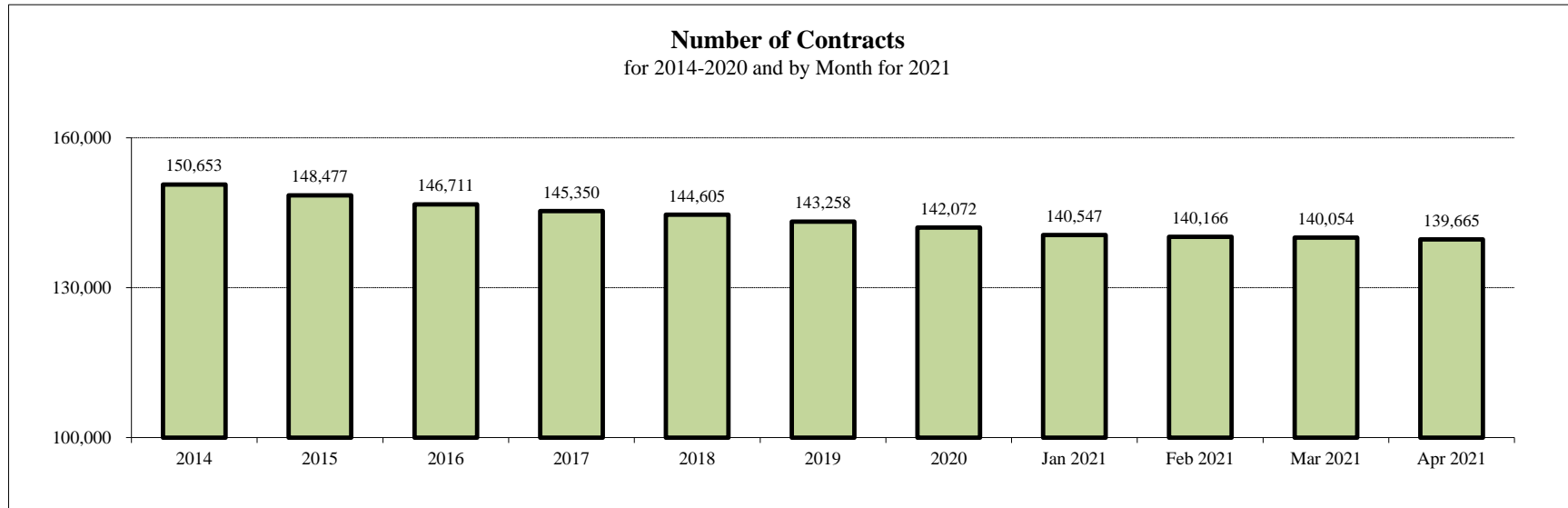
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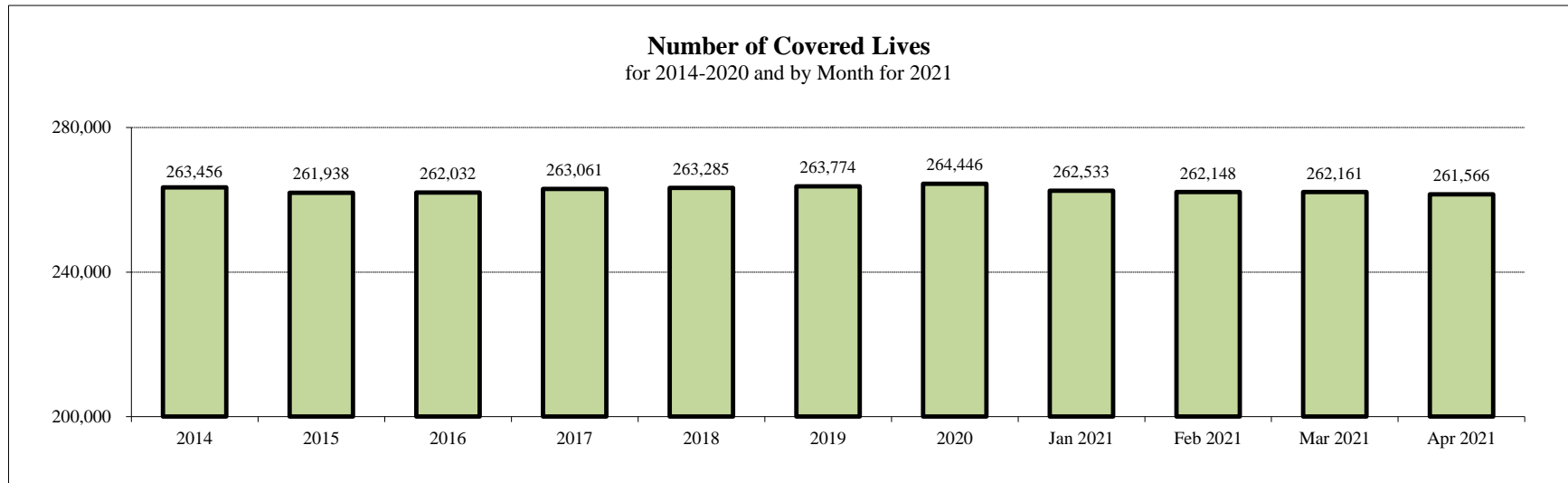
Paid data as of: April 2021
Incurred data as of: January 2021

Enrollment

The following chart shows planholder enrollment (contracts) for 2014-2020 and monthly year-to-date for 2021. Enrollment will fluctuate on a monthly basis. (Approximately 7,000 Cross-Reference spouses in any given month are not included.)

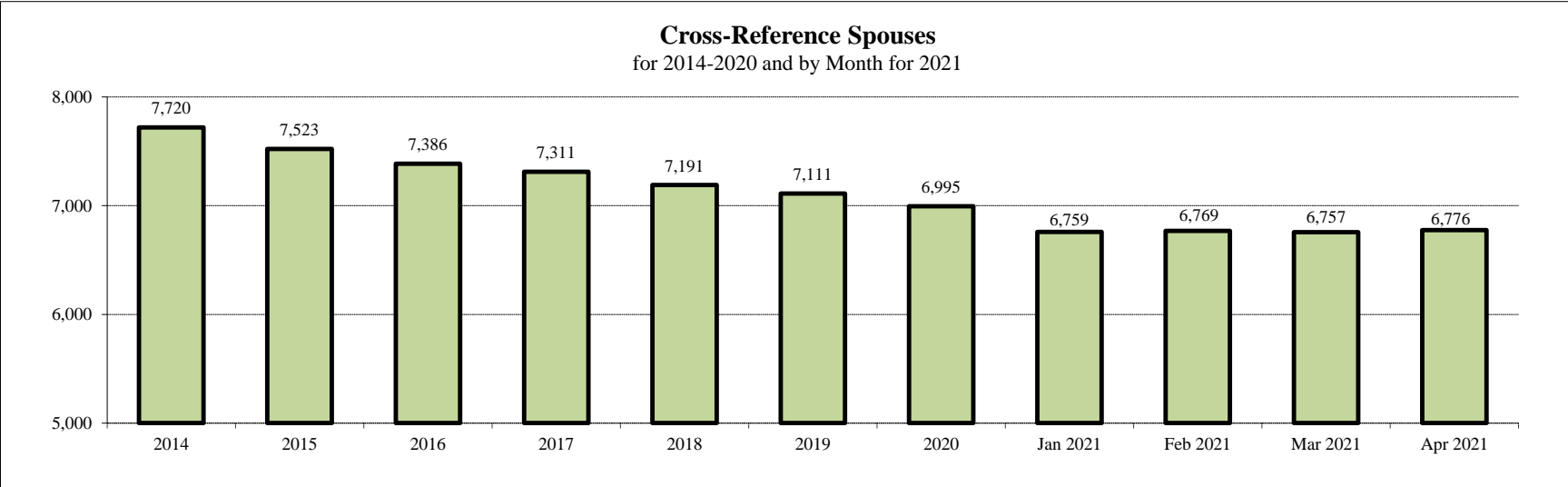


The following chart shows member enrollment (covered lives) for 2014-2020 and monthly year-to-date for 2021. Enrollment will fluctuate on a monthly basis.



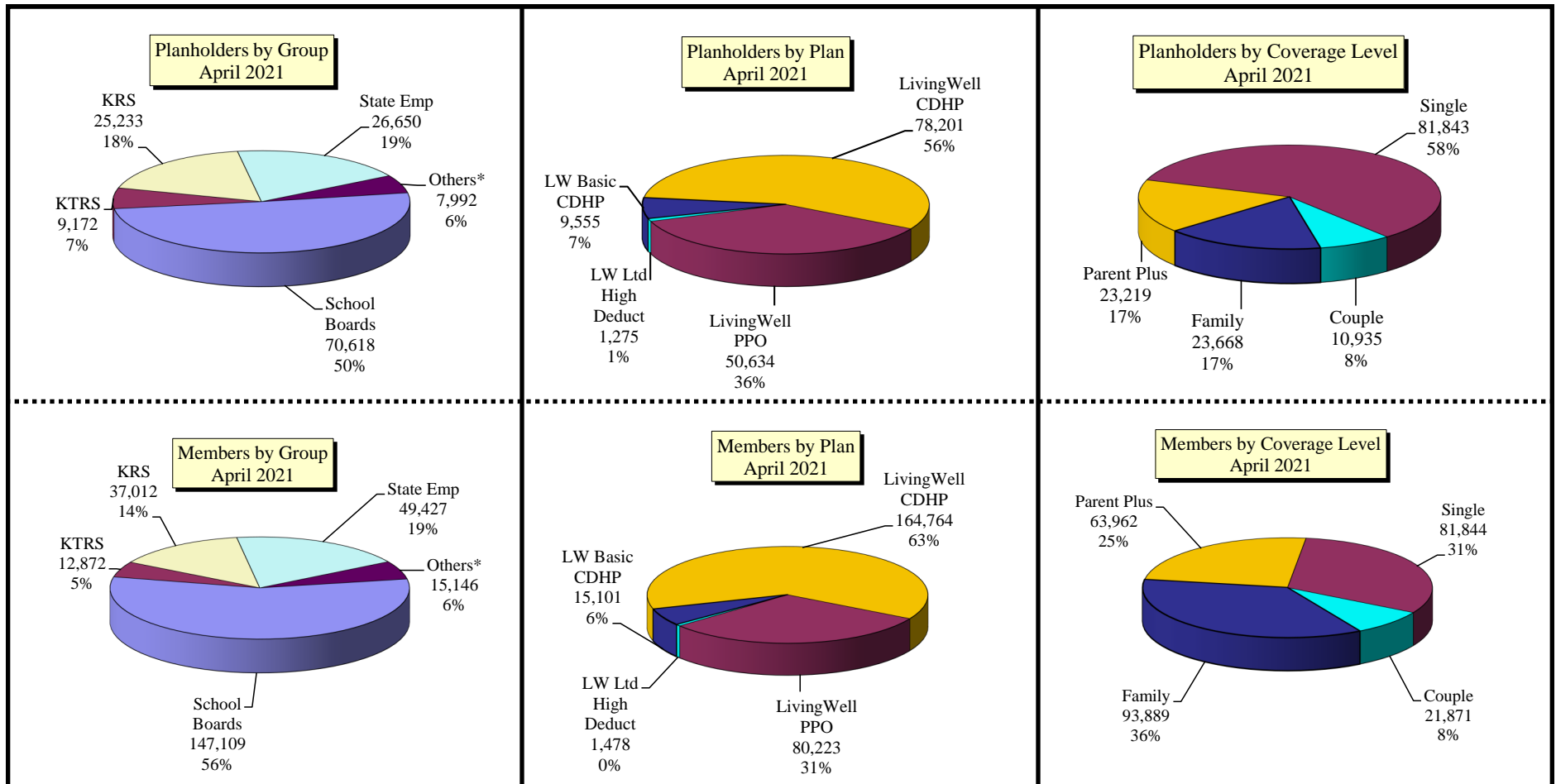
Enrollment *(continued)*

The following graph shows the number of Cross-Reference Spouses for 2014-2020 and monthly year-to-date for 2021. The number of Cross-Reference Spouses will fluctuate on a monthly basis.



Enrollment *(continued)*

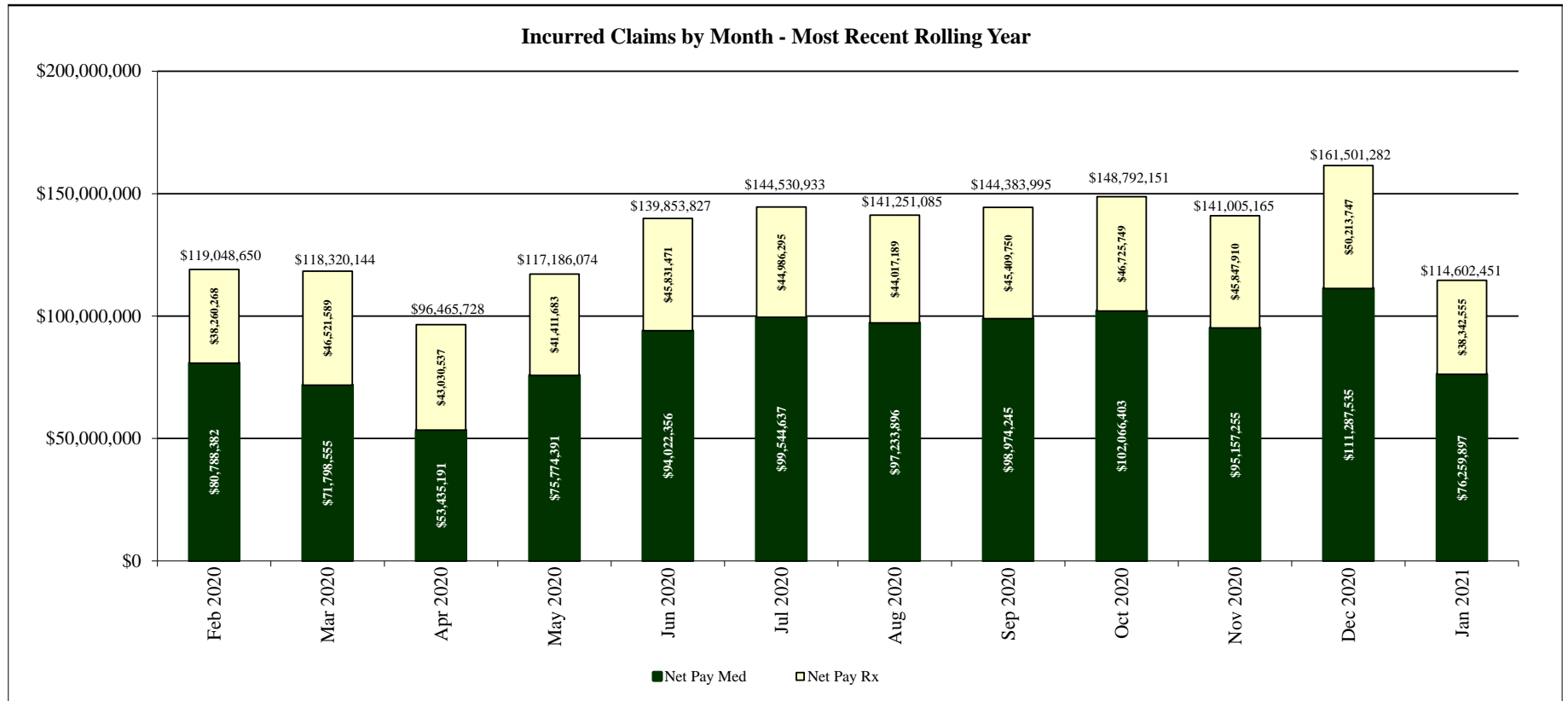
The following charts show Planholder and Member enrollment by Group, Health Plan, and Coverage Level.



* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs

Claims costs include Incurred Medical and Pharmacy (Rx) Claims Cost for the most recent rolling year.



Claims Costs *(continued)*

The following table represents Incurred Medical Claims by Group for 2014-2020 and monthly year-to-date for 2021.

INCURRED MEDICAL CLAIMS BY GROUP						
Time Period	School Boards	KTRS	KRS	State Employees	Others*	Totals
2014	\$465,112,511	\$121,029,097	\$216,483,334	\$202,992,249	\$80,366,825	\$1,085,984,016
2015	\$406,274,265	\$100,740,841	\$189,171,718	\$159,515,036	\$62,699,633	\$918,401,495
2016	\$435,740,756	\$101,146,437	\$194,916,035	\$172,375,342	\$59,493,914	\$963,672,484
2017	\$455,191,695	\$95,513,039	\$197,611,708	\$177,397,741	\$61,172,947	\$986,887,130
2019	\$537,004,032	\$104,144,278	\$224,992,802	\$200,217,729	\$70,980,494	\$1,137,339,334
2020	\$502,572,541	\$94,600,181	\$210,136,701	\$178,452,557	\$70,368,054	\$1,056,130,034
Jan 2021	\$35,750,174	\$7,429,193	\$15,015,710	\$12,845,824	\$5,218,995	\$76,259,897

** Others include COBRA, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).*

Claims Costs *(continued)*

The following table represents Incurred Pharmacy Claims by Group for 2014-2020 and monthly year-to-date for 2021.

INCURRED RX CLAIMS BY GROUP						
Time Period	School Boards	KTRS	KRS	State Employees	Others*	Totals
2014	\$131,098,426	\$43,053,078	\$73,830,755	\$55,751,835	\$20,884,223	\$324,618,317
2015	\$128,985,096	\$42,244,335	\$74,179,491	\$56,345,078	\$21,644,747	\$323,398,746
2016	\$150,206,049	\$44,006,471	\$82,345,637	\$62,097,368	\$23,887,655	\$362,543,182
2017	\$169,448,080	\$46,569,409	\$89,294,930	\$68,690,782	\$25,682,152	\$399,685,354
2018	\$188,865,977	\$48,505,632	\$98,922,301	\$74,050,016	\$28,077,054	\$438,420,980
2019	\$213,129,617	\$50,389,744	\$110,090,379	\$83,759,506	\$31,880,352	\$489,249,598
2020	\$236,140,512	\$52,174,272	\$117,524,604	\$90,428,944	\$34,636,277	\$530,904,610
Jan 2021	\$17,094,123	\$3,686,574	\$8,565,116	\$6,546,371	\$2,450,371	\$38,342,555

** Others include COBRA, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).*

Claims Costs *(continued)*

The following table represents Incurred Medical Claims by Health Plan for 2014-2020 and monthly year-to-date for 2021.

INCURRED MEDICAL CLAIMS BY PLAN								
Time Period	Standard PPO	Standard CDHP	LivingWell PPO	LivingWell CDHP	LivingWell Basic CDHP	LW Limited High Deductible	Missing*	Total
2014	\$57,385,008	\$46,095,825	\$598,724,084	\$375,470,631	\$0	\$0	\$8,215,648	\$1,085,986,030
2015	\$44,667,793	\$42,933,513	\$448,976,661	\$376,288,350	\$0	\$0	\$8,215,648	\$921,081,965
2016	\$53,523,467	\$48,589,204	\$446,510,072	\$408,115,361	\$0	\$0	\$6,842,661	\$963,580,765
2017	\$66,938,779	\$30,774,775	\$411,835,314	\$472,036,290	\$11,960	\$0	\$5,290,012	\$986,887,130
2018	\$85,772,056	\$27,242,111	\$407,340,769	\$522,598,074	\$220,447	\$25,858	\$4,403,662	\$1,047,602,976
2019	\$8,176	\$1,393	\$446,962,130	\$642,310,685	\$29,861,766	\$13,616,053	\$4,579,131	\$1,137,339,334
2020	\$0	\$0	\$397,749,289	\$618,172,361	\$27,135,357	\$8,857,012	\$4,216,015	\$1,056,130,034
Jan 2021	\$0	\$0	\$29,904,343	\$43,857,671	\$1,669,070	\$489,882	\$338,930	\$76,259,897

* Missing means the claims could not be tagged to a specific Health Plan.

Claims Costs *(continued)*

The following table represents Incurred Pharmacy Claims by Health Plan for 2014-2020 and monthly year-to-date for 2021.

INCURRED RX CLAIMS BY PLAN								
Time Period	Standard PPO	Standard CDHP	LivingWell PPO	LivingWell CDHP	LivingWell Basic CDHP	LW Limited High Deductible	Missing**	Total
2014	\$17,730,754	\$5,829,739	\$217,764,345	\$82,940,511	\$0	\$0	\$352,968	\$324,618,317
2015	\$16,014,926	\$6,904,578	\$201,586,203	\$98,816,804	\$0	\$0	\$76,235	\$323,398,746
2016	\$19,014,651	\$7,491,440	\$216,158,709	\$119,656,922	\$0	\$0	\$210,122	\$362,531,844
2017	\$22,801,969	\$4,760,588	\$217,240,015	\$154,801,085	\$0	\$5	\$81,691	\$399,685,354
2018	\$32,792,111	\$5,129,223	\$220,318,919	\$180,122,408	\$0	\$0	\$58,319	\$438,420,980
2019	\$36,488	\$329	\$249,509,370	\$231,016,029	\$5,458,633	\$2,961,398	\$267,351	\$489,249,598
2020	\$0	\$0	\$268,839,112	\$253,950,916	\$6,033,596	\$1,961,801	\$119,184	\$530,904,610
Jan 2021	\$0	\$0	\$20,856,045	\$16,871,535	\$397,195	\$187,618	\$30,161	\$38,342,555

***Missing means the claims could not be tagged to a specific Health Plan.*

Claims Costs *(continued)*

The following represents Incurred Medical Claims by Coverage Level for 2014-2020 and monthly year-to-date for 2021.

INCURRED MEDICAL CLAIMS BY COVERAGE LEVEL						
Time Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2014	\$131,271,014	\$239,094,807	\$182,552,523	\$524,850,024	\$8,215,648	\$1,085,984,016
2015	\$113,343,648	\$214,227,846	\$156,724,117	\$428,570,705	\$5,535,178	\$918,401,495
2016	\$115,908,780	\$234,298,626	\$158,406,884	\$450,029,689	\$5,028,505	\$963,672,484
2017	\$125,249,301	\$253,489,908	\$160,158,807	\$442,699,103	\$5,290,012	\$986,887,130
2018	\$134,620,915	\$270,273,357	\$170,684,021	\$467,621,020	\$0	\$1,043,199,313
2019	\$144,812,746	\$299,704,394	\$195,442,237	\$492,800,827	\$0	\$1,132,760,203
2020	\$140,490,323	\$283,192,923	\$173,087,245	\$455,143,385	\$142	\$1,051,914,019
Jan 2021	\$9,624,865	\$19,621,148	\$13,488,451	\$33,186,503	\$0	\$75,920,967

**Unable to tag claims to a specific coverage level*

Claims Costs *(continued)*

The following represents Incurred Pharmacy Claims by Coverage Level for 2014-2020 and monthly year-to-date for 2021.

INCURRED RX CLAIMS BY COVERAGE LEVEL						
Time Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2014	\$45,477,497	\$67,741,378	\$45,635,023	\$165,451,246	\$313,173	\$324,618,317
2015	\$42,957,491	\$68,806,053	\$45,211,695	\$166,347,272	\$76,235	\$323,398,746
2016	\$48,058,582	\$80,398,062	\$49,757,539	\$184,153,799	\$175,199	\$362,543,182
2017	\$52,795,745	\$92,113,848	\$55,352,719	\$199,341,350	\$81,691	\$399,685,354
2018	\$55,671,337	\$104,434,142	\$60,725,397	\$217,531,785	\$58,319	\$438,420,980
2019	\$63,897,335	\$119,147,283	\$70,465,119	\$235,472,509	\$267,351	\$489,249,598
2020	\$68,949,384	\$132,894,324	\$78,642,789	\$250,298,929	\$119,184	\$530,904,610
Jan 2021	\$5,052,150	\$9,043,063	\$5,788,874	\$18,428,306	\$30,161	\$38,342,555

**Unable to tag claims to a specific coverage level*

Medical Claims Utilization

The following is based on Incurred Medical Claims* from Jan 2021.

Plan	Admits Per 1000 Acute	Admits Per 1000 Acute Rnt SGovt	% Diff from Rnt SGovt	Days LOS per Admit Acute	Days LOS per Admit Acute Rnt SGovt	% Diff from Rnt SGovt	Days Per 1000 Admits Acute	Days Per 1000 Admits Acute Rnt SGovt	% Diff from Rnt SGovt
LivingWell CDHP	49.36	51.53	-4.21%	4.81	4.77	0.92%	237.66	231.53	2.65%
LivingWell PPO	63.85	53.92	18.41%	5.60	5.12	9.43%	357.48	252.91	41.35%
LW Limited High Deductible	124.40	60.48	105.67%	3.80	5.86	-35.15%	472.70	289.69	63.18%
LivingWell Basic CDHP	24.56	49.73	-50.61%	5.26	4.79	9.66%	129.14	216.64	-40.39%
Average	52.79	52.21	1.12%	5.10	4.91	3.88%	269.50	237.56	13.44%

Plan	Visits Per 1000 Office	Visits Per 1000 Office Rnt US	% Diff from Rnt US	Visits Per 1000 ER	Visits Per 1000 ER Rnt US	% Diff from Rnt US
LivingWell CDHP	8,290.07	6,863.24	17.21%	154.04	229.77	-49.17%
LivingWell PPO	9,758.83	7,568.19	22.45%	188.86	233.96	-23.88%
LW Limited High Deductible	5,937.80	7,563.56	-27.38%	422.94	233.54	44.78%
LivingWell Basic CDHP	5,285.36	6,595.94	-24.80%	121.22	231.78	-91.20%
Average	8,554.86	7,068.19	17.38%	164.32	231.19	-40.70%

Notes:

Rnt SGovt—Recent State Government

Rnt US—Recent US

LOS—Length of Stay

OP—Outpatient

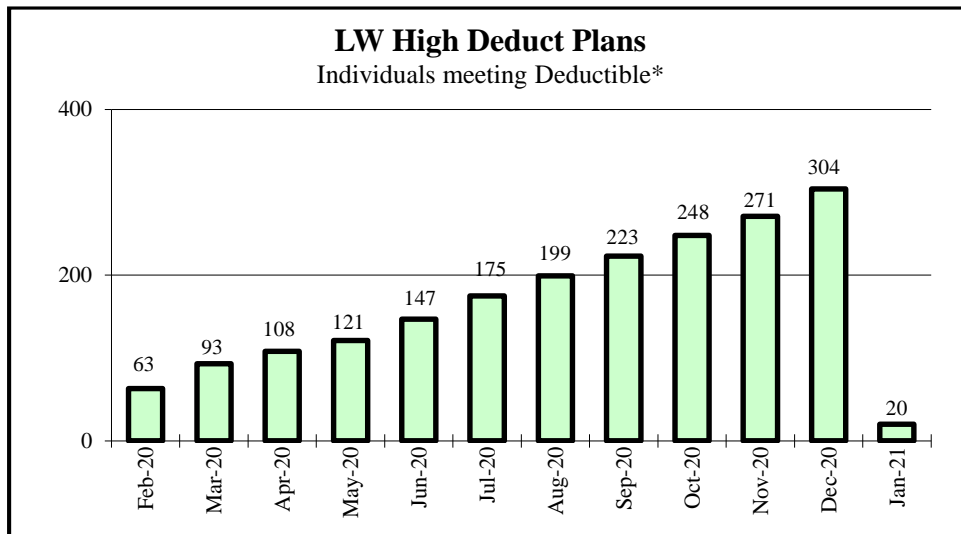
OP Rad—Outpatient Radiology

Plan	Svcs Per 1000 OP Lab	Svcs Per 1000 OP Lab Rnt US	% Diff from Rnt US	Svcs Per 1000 OP Rad	Svcs Per 1000 OP Rad Rnt US	%Diff from Rnt US
LivingWell CDHP	9,698.42	8,103.20	19.69%	2,057.09	1,974.79	4.17%
LivingWell PPO	12,246.90	9,295.91	31.75%	2,775.01	2,446.04	13.45%
LW Limited High Deductible	11,494.13	9,836.61	16.85%	2,073.26	2,375.89	-12.74%
LivingWell Basic CDHP	6,739.21	8,085.33	-16.65%	1,389.67	1,891.19	-26.52%
Average	10,320.30	8,478.05	21.73%	2,239.17	2,116.91	5.78%

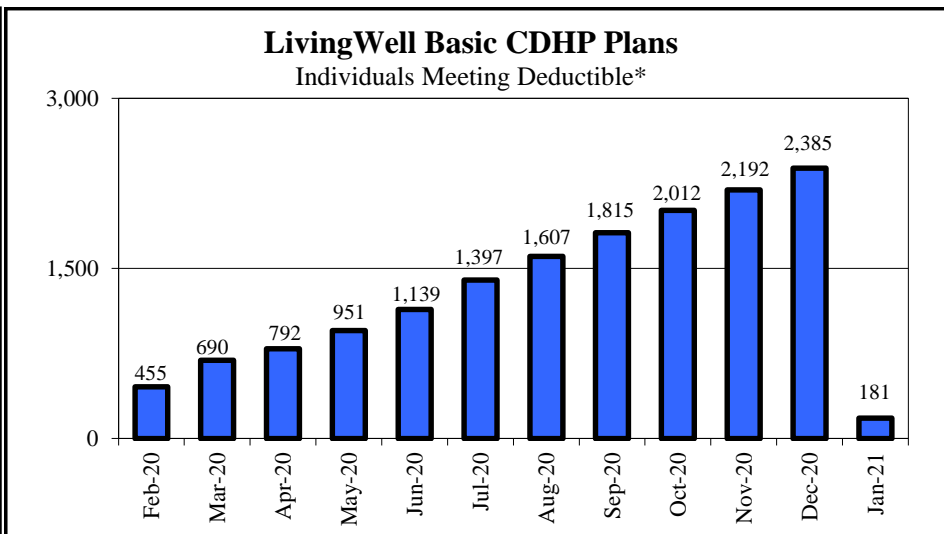
*Services are tracked by each service, not by each visit. Therefore, if two laboratory services are performed at one visit, it will count as two services.

Analysis of Individuals and Families Meeting Their Deductibles

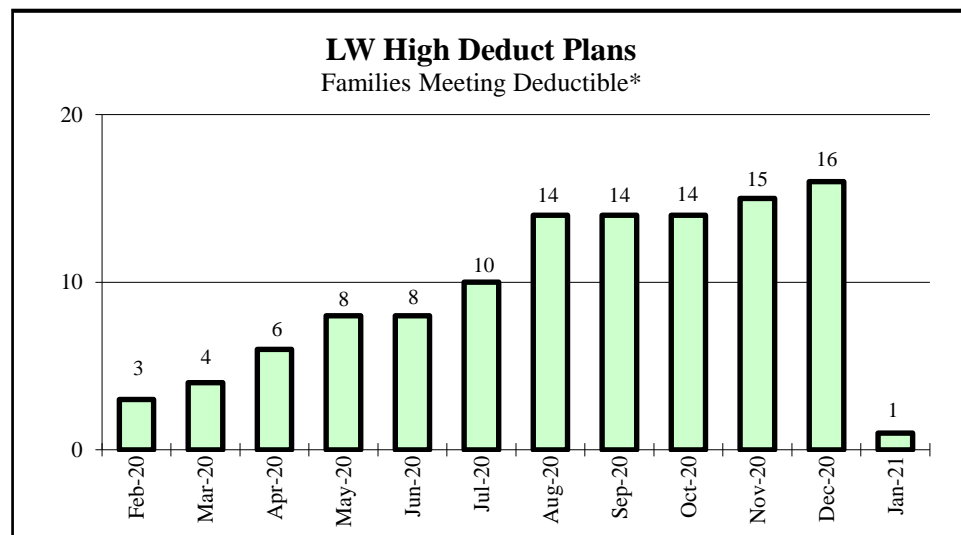
The following details the number of individuals and families by Health Plan that met their deductible for the latest rolling year. This report is based on Incurred Medical and Pharmacy Claims.



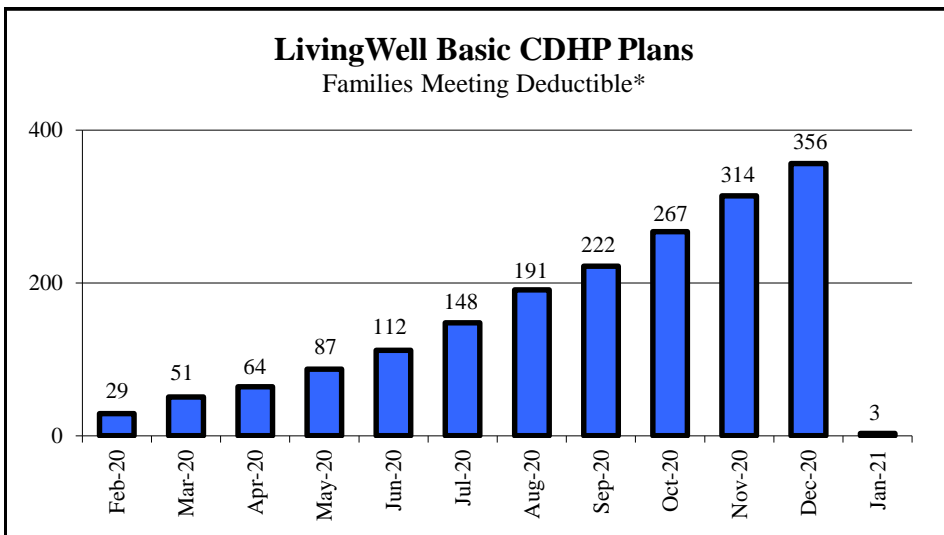
* 2020 and 2021 LW High Deduct Individual deductible is \$4,250



* 2020 and 2021 LivingWell Basic Individual deductible is \$2,000



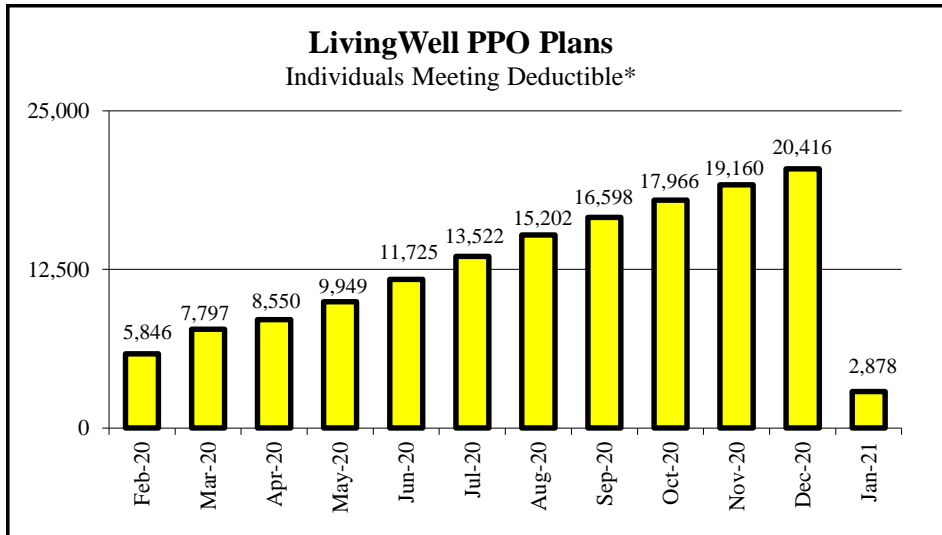
* 2020 and 2021 LW High Deduct Family deductible is \$8,250



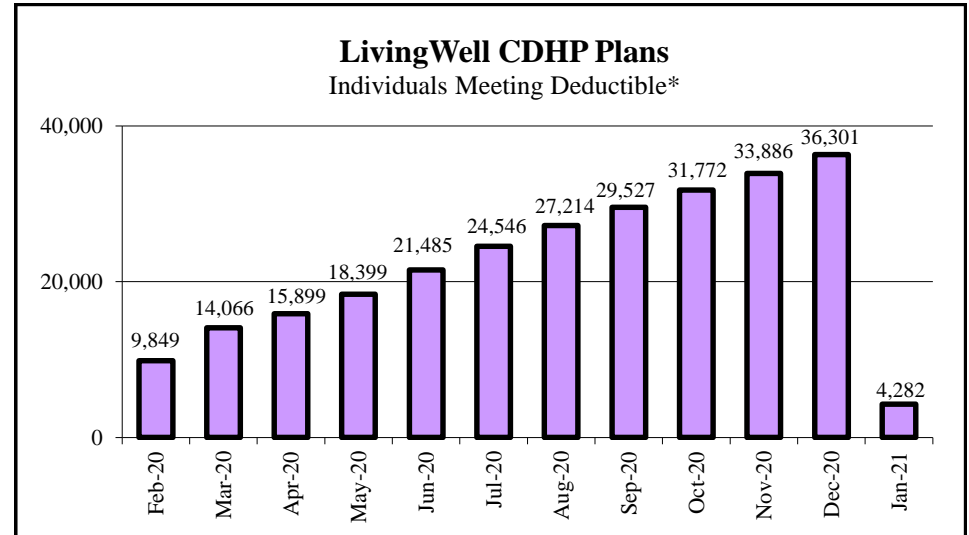
* 2020 and 2021 LivingWell Basic Family deductible is \$3,750

Analysis of Individuals and Families Meeting Their Deductibles *(continued)*

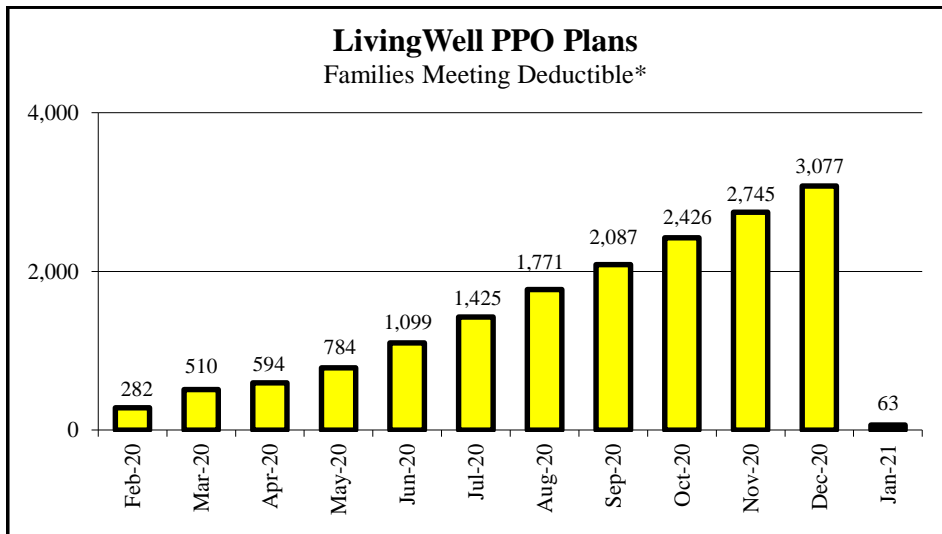
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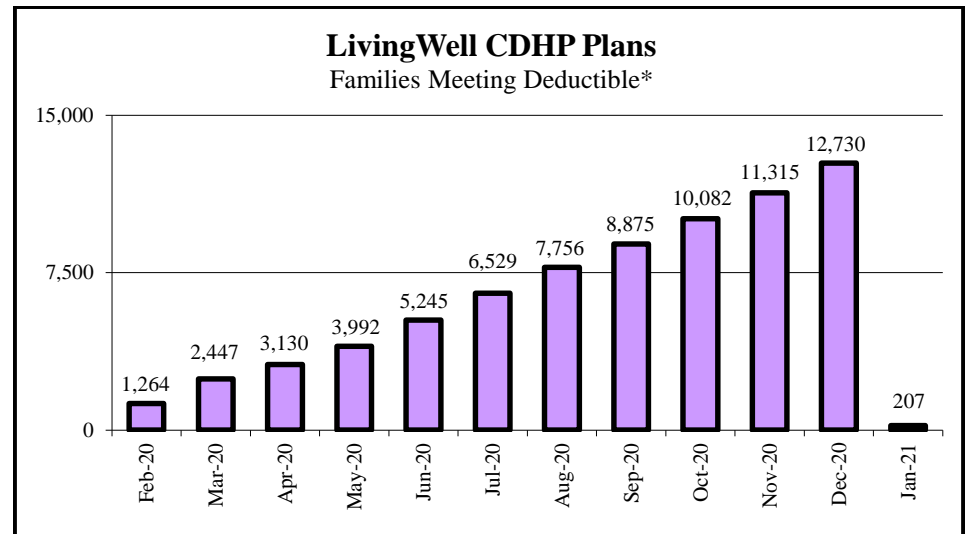
*2020 and 2021 LivingWell PPO Individual deductible is \$1,000



* 2020 and 2021 LivingWell CDHP Individual deductible is \$1,500



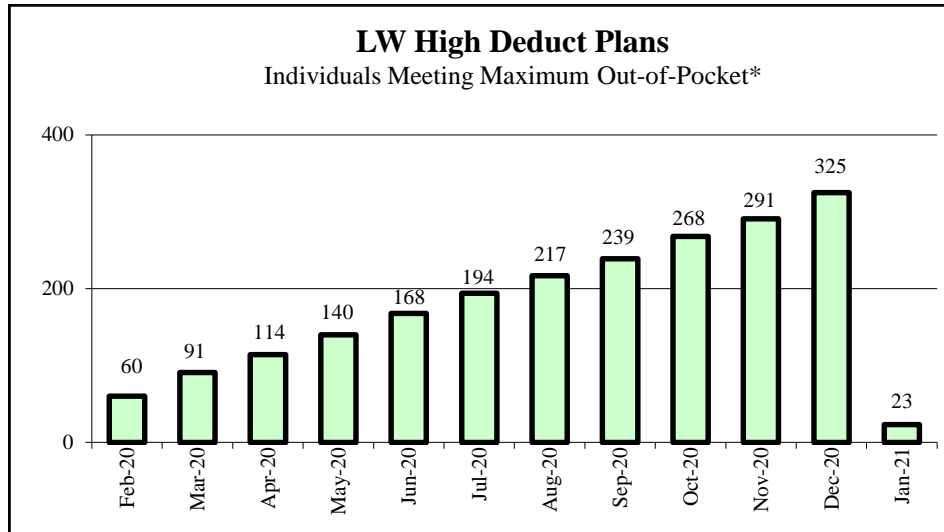
* 2020 and 2021 LivingWell PPO Family deductible is \$1,750



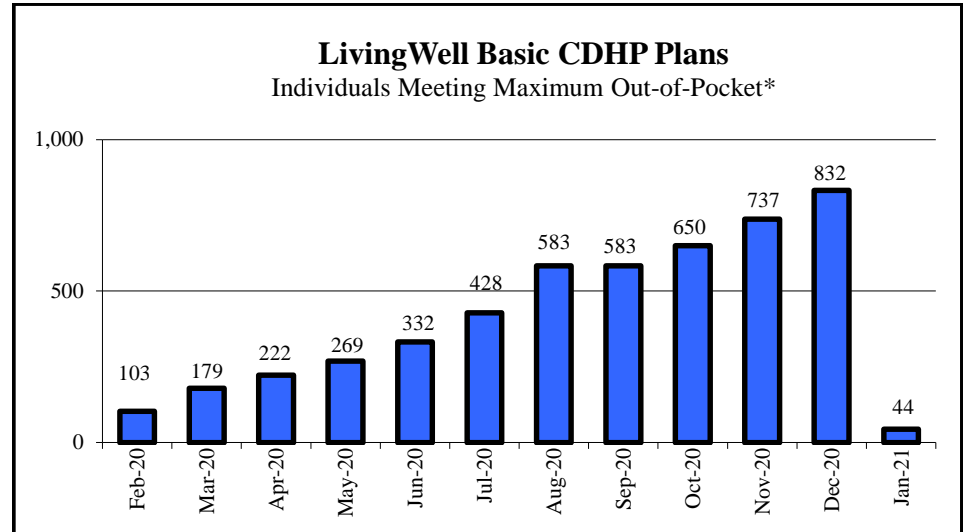
* 2020 and 2021 LivingWell CDHP Family deductible is \$2,750

Analysis of Individuals and Families Meeting Their Maximum Out-of-Pocket Expenses

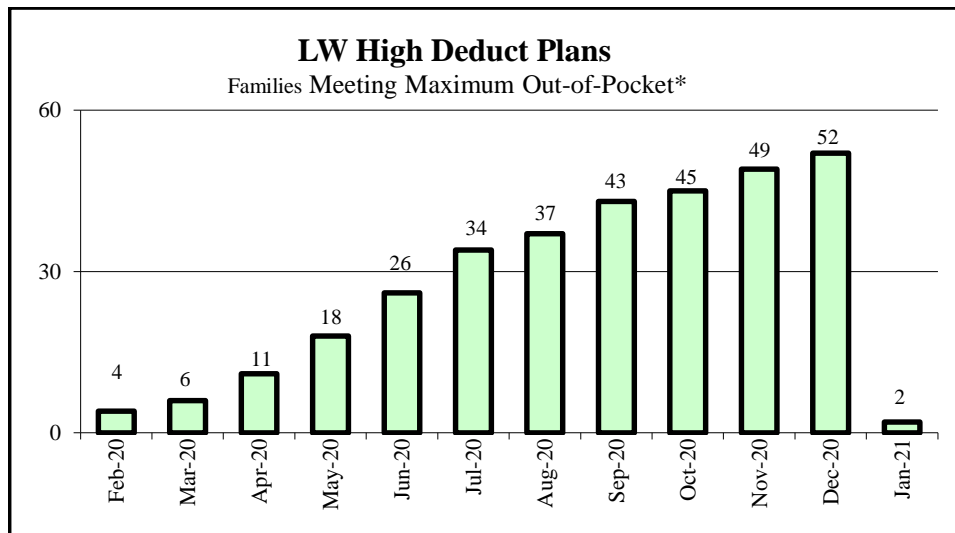
The following details the number of individuals and families by Health Plan that met their maximum out-of-pocket expense for the latest rolling year. This report is based on Incurred Medical and Pharmacy claims.



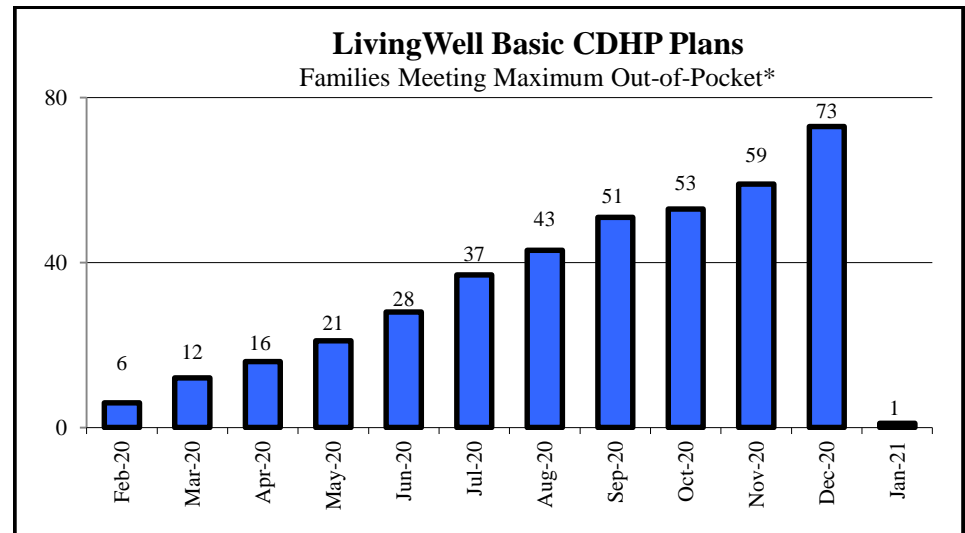
* 2020 and 2021 LW High Deduct Individual MOOP is \$5250



* 2020 and 2021 LivingWell Basic CDHP Individual MOOP is \$4,000



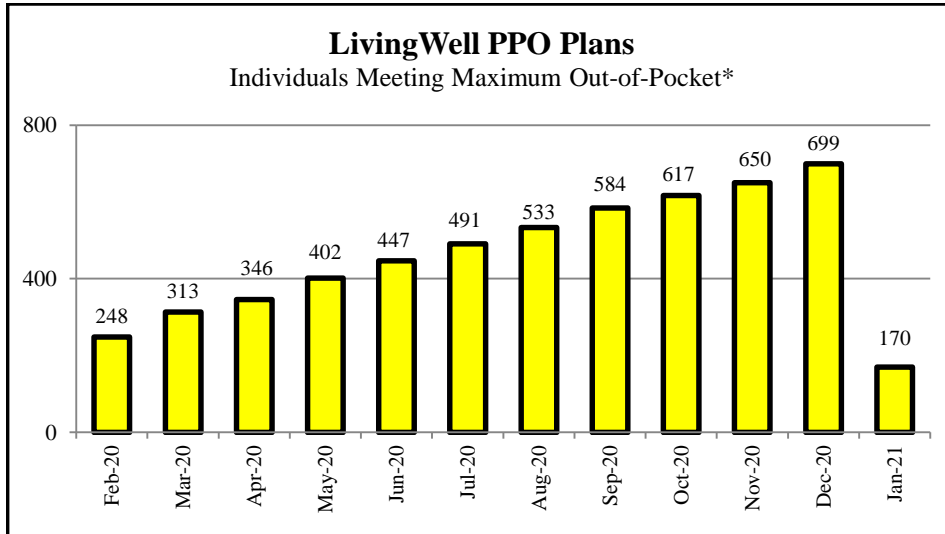
* 2020 and 2021 LW High Deduct Family MOOP is \$10,250



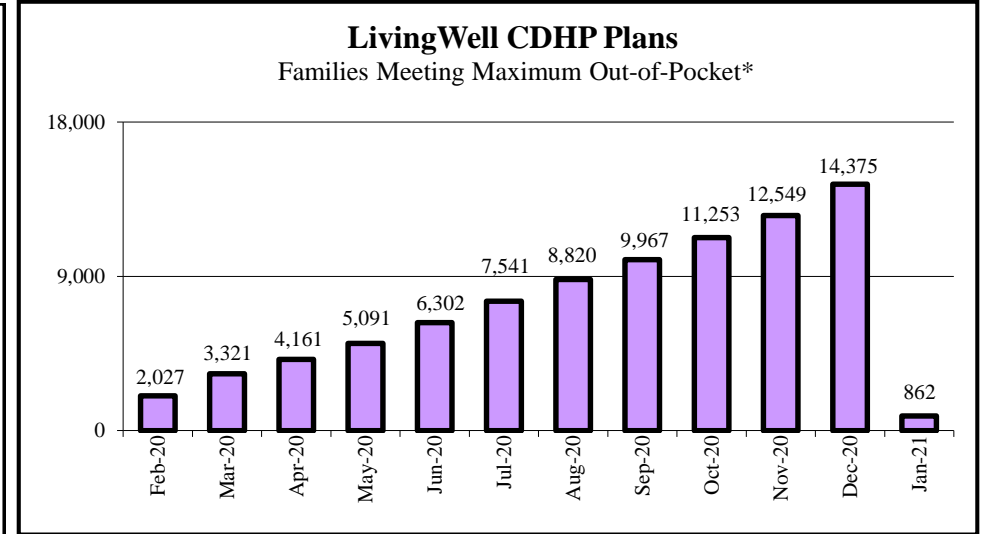
* 2020 and 2021 LivingWell Basic CDHP Family MOOP is \$7,750

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

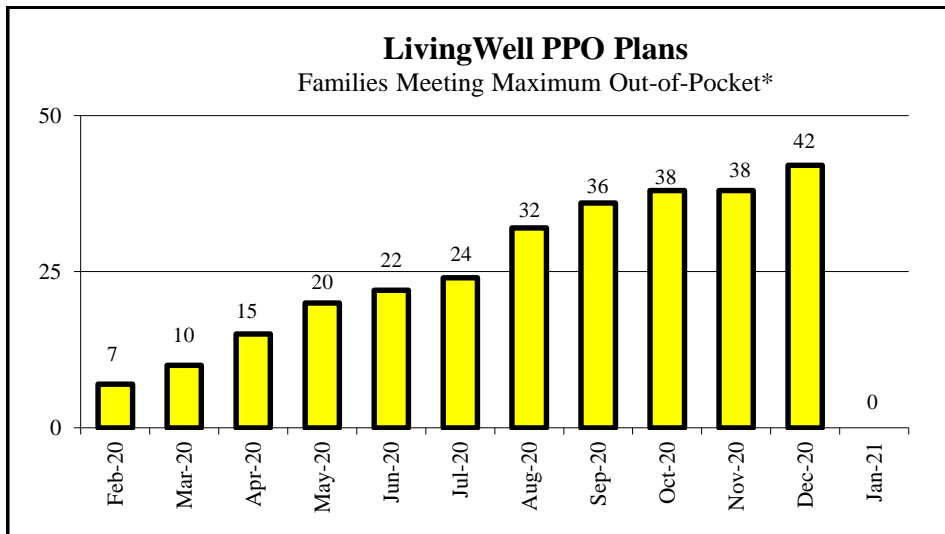
The following details the number of individuals and families by Health Plan that met their maximum out of pocket expense for the latest rolling year. This report is based on Incurred Medical and Pharmacy claims.



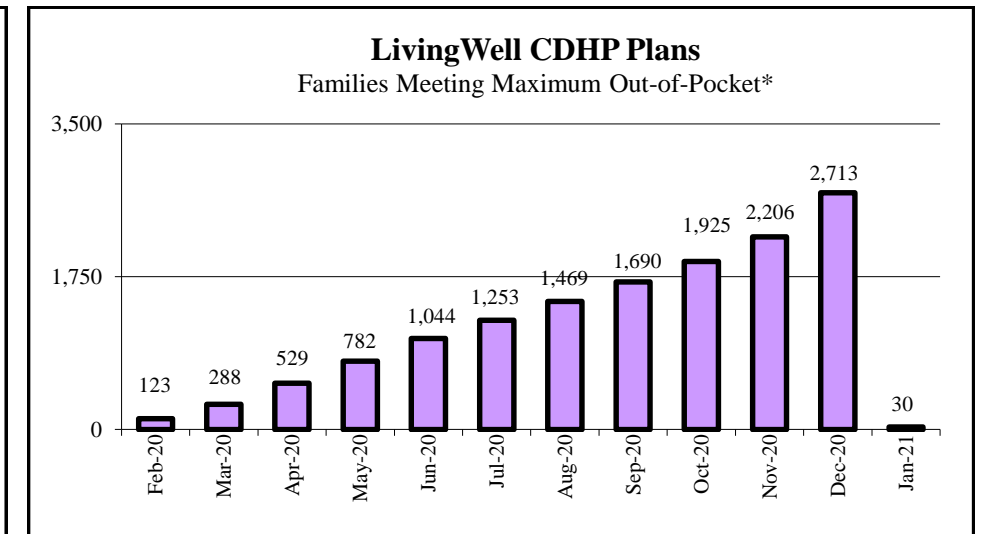
* 2020 and 2021 LivingWell PPO Individual Maximum Out of Pocket is \$3,000



* 2020 and 2021 LivingWell CDHP Individual Maximum Out of Pocket is \$3,000



* 2020 and 2021 LivingWell PPO Family Maximum Out of Pocket is \$5,750



* 2020 and 2021 LivingWell CDHP Family Maximum Out of Pocket is \$5,750

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out-of-Pocket Expenses

The following details the number of individuals and families by Health Plan that met their deductibles and/or maximum out-of-pocket (MOOP) expense for the years 2014-2021. This report is based on Incurred Medical and Pharmacy claims.

Individuals and Families in Standard PPO (2014—2018) and LW High Deduct (2019-Present)									
		Individuals				Families			
Plan year	Plan Name	Deductible	Meeting Deductible	MOOP	Meeting MOOP	Deductible	Meeting Deductible	MOOP	Meeting MOOP
2014	Standard PPO	\$750	34.91%	\$3,500	6.82%	\$1,500	10.68%	\$7,000	0.82%
2015	Standard PPO	\$750	33.28%	\$3,500	5.31%	\$1,500	9.53%	\$7,000	0.30%
2016	Standard PPO	\$750	34.21%	\$3,500	5.85%	\$1,500	10.07%	\$7,000	0.39%
2017	Standard PPO	\$750	35.00%	\$3,750	6.95%	\$1,500	7.06%	\$7,500	0.30%
2018	Standard PPO	\$750	36.19%	\$3,750	5.91%	\$1,500	7.62%	\$7,500	0.29%
2019	LW High Deduct	\$4,000	15.50%	\$5,000	15.20%	\$8,000	0.78%	\$10,000	1.68%
2020	LW High Deduct	\$4,250	13.64%	\$5,250	14.58%	\$8,250	0.53%	\$10,250	1.73%
2021	LW High Deduct	\$4,250	1.38%	\$5,250	1.59%	\$8,250	0.08%	\$10,250	0.16%

Individuals and Families in Standard CDHP (2014—2018) and LW Basic CDHP (2019-Present)									
		Individuals				Families			
Plan year	Plan Name	Deductible	Meeting De-ductible	MOOP	Meeting MOOP	Deductible	Meeting De-ductible	MOOP	Meeting MOOP
2014	Standard CDHP	\$1,750	20.45%	\$3,500	7.38%	\$3,500	2.41%	\$7,000	0.47%
2015	Standard CDHP	\$1,750	18.67%	\$3,500	6.90%	\$3,500	1.88%	\$7,000	0.34%
2016	Standard CDHP	\$1,750	19.69%	\$3,500	7.96%	\$3,500	2.17%	\$7,000	0.47%
2017	Standard CDHP	\$1,750	16.92%	\$3,750	6.35%	\$3,500	2.38%	\$7,500	0.42%
2018	Standard CDHP	\$1,750	17.68%	\$3,750	6.66%	\$3,500	2.73%	\$7,500	0.77%
2019	LW Basic CDHP	\$1,750	17.36%	\$3,750	6.41%	\$3,500	3.22%	\$7,500	0.52%
2020	LW Basic CDHP	\$2,000	15.28%	\$4,000	5.33%	\$3,750	3.22%	\$7,750	0.66%
2021	LW Basic CDHP	\$2,001	1.20%	\$4,001	0.29%	\$3,751	0.03%	\$7,751	0.01%

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out-of-Pocket Expenses *(continued)*

The following details the number of individuals and families by Health Plan that met their deductibles and/or maximum out-of-pocket (MOOP) expense for the years 2014-2021. This report is based on Incurred Medical and Pharmacy claims.

Individuals and Families in LivingWell PPO (2014—Present)									
		Individuals				Families			
Plan year	Plan Name	Deductible	Meeting De-ductible	MOOP	Meeting MOOP	Deductible	Meeting De-ductible	MOOP	Meeting MOOP
2014	LivingWell PPO	\$500	11.85%	\$2,500	3.74%	\$1,000	4.70%	\$3,000	0.49%
2015	LivingWell PPO	\$500	34.97%	\$2,500	0.69%	\$1,000	7.88%	\$5,000	0.16%
2016	LivingWell PPO	\$500	35.87%	\$2,500	0.65%	\$1,000	7.87%	\$5,000	0.13%
2017	LivingWell PPO	\$750	32.00%	\$2,750	0.65%	\$1,500	6.38%	\$5,500	0.08%
2018	LivingWell PPO	\$750	32.74%	\$2,750	0.74%	\$1,500	6.38%	\$5,500	0.07%
2019	LivingWell PPO	\$750	33.92%	\$2,750	0.67%	\$1,500	6.66%	\$5,500	0.07%
2020	LivingWell PPO	\$1,000	25.07%	\$3,000	0.86%	\$1,750	5.48%	\$5,750	0.07%
2021	LivingWell PPO	\$1,000	3.57%	\$3,000	0.21%	\$1,750	0.12%	\$5,750	0.00%

Individuals and Families in LivingWell CDHP (2014— Present)									
		Individuals				Families			
Plan year	Plan Name	Deductible	Meeting De-ductible	MOOP	Meeting MOOP	Deductible	Meeting De-ductible	MOOP	Meeting MOOP
2014	LivingWell CDHP	\$1,250	29.04%	\$2,500	8.89%	\$2,500	17.39%	\$5,000	2.24%
2015	LivingWell CDHP	\$1,250	29.30%	\$2,500	8.61%	\$2,500	17.55%	\$5,000	1.89%
2016	LivingWell CDHP	\$1,250	28.69%	\$2,500	9.17%	\$2,500	17.90%	\$5,000	2.35%
2017	LivingWell CDHP	\$1,250	28.23%	\$2,750	8.51%	\$2,500	17.56%	\$5,500	2.59%
2018	LivingWell CDHP	\$1,250	28.80%	\$2,750	8.97%	\$2,500	18.48%	\$5,500	3.04%
2019	LivingWell CDHP	\$1,250	29.38%	\$2,750	9.48%	\$2,500	33.26%	\$5,500	3.19%
2020	LivingWell CDHP	\$1,500	21.98%	\$3,000	8.70%	\$2,750	15.03%	\$5,750	3.20%
2021	LivingWell CDHP	\$1,501	2.59%	\$3,001	0.52%	\$2,751	0.26%	\$5,751	0.04%

Premium

The following details the amount of premium* paid by the employee and employer for 2014-2020 and monthly through 2021.

Time Period	Employee Premium Amount	Employer Premium Amount	Total Premium Amount
2014	\$265,431,508	\$1,348,631,926	\$1,614,063,434
2015	\$256,371,746	\$1,362,686,924	\$1,619,058,670
2016	\$254,661,768	\$1,380,830,820	\$1,635,492,588
2017	\$255,169,294	\$1,374,862,647	\$1,630,031,942
2018	\$262,595,375	\$1,384,164,265	\$1,646,759,641
2019	\$265,841,372	\$1,373,033,885	\$1,638,875,257
2020	\$276,675,312	\$1,364,377,186	\$1,641,052,498
Jan 2021	\$23,551,167	\$116,021,140	\$139,572,307
Feb 2021	\$23,546,142	\$115,832,587	\$139,378,729
Mar 2021	\$23,541,940	\$115,772,356	\$139,314,296
Apr 2021	\$23,456,256	\$115,495,487	\$138,951,743

**Premium is based on enrollment using published premium rates—it is NOT based on actual payments received.*

Prescription Drug Utilization *(continued)*

The following details the type of prescription filled, the percent that were generic, and the generic efficiency percentage for the most recent rolling year. Based on Paid Pharmacy Claims.

Time Period: Paid Month	Generic	Brand Name, Generic Available	Brand Name	Other*	Total	Scripts Rx % Generic	Scripts Generic Efficiency Rx**
May 2020	268,288	5,473	28,270	10,646	312,677	85.80%	98.00%
Jun 2020	288,992	5,820	31,204	11,509	337,525	85.62%	98.03%
Jul 2020	290,385	5,923	31,045	11,147	338,500	85.79%	98.00%
Aug 2020	282,785	5,704	32,252	10,860	331,601	85.28%	98.02%
Sep 2020	278,056	5,633	44,589	10,986	339,264	81.96%	98.01%
Oct 2020	285,429	5,779	54,674	11,571	357,453	79.85%	98.02%
Nov 2020	279,863	5,572	37,900	10,249	333,584	83.90%	98.05%
Dec 2020	301,789	6,120	36,311	11,777	355,997	84.77%	98.01%
Jan 2021	274,725	3,867	25,257	10,059	313,908	87.52%	98.61%
Feb 2021	248,989	4,157	34,785	10,279	298,210	83.49%	98.36%
Mar 2021	300,987	5,007	52,422	14,908	373,324	80.62%	98.36%
Apr 2021	282,780	4,832	41,924	12,721	342,257	82.62%	98.32%

**Other category includes: Over-the-Counter (usually items such as diabetic supplies, syringes, and test strips, etc.) and claims that were unable to be tagged to a specific group.*

***Generic Efficiency Rate means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.*

Prescription Drug Utilization *(continued)*

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred Pharmacy Claims.

Time Period	Members	Patients	Scripts	Scripts Per Member	Scripts Per Patient	Allow Amt* Per Script	Net Pay Per Script	Member Cost Per Script**	Patient Cost Per Script***
Feb 2020	265,107	158,311	348,438	1.31	2.72	\$129.35	\$109.81	\$25.20	\$42.21
Mar 2020	265,515	153,797	383,205	1.44	2.95	\$139.32	\$121.40	\$25.39	\$43.83
Apr 2020	266,038	129,248	314,394	1.18	2.77	\$154.79	\$136.87	\$20.61	\$42.41
May 2020	266,132	137,070	312,557	1.17	2.76	\$148.56	\$132.49	\$18.44	\$35.81
Jun 2020	265,885	150,449	336,906	1.27	2.85	\$151.78	\$136.04	\$19.50	\$34.47
Jul 2020	264,578	156,840	339,611	1.28	2.84	\$146.98	\$132.46	\$18.10	\$30.54
Aug 2020	262,892	152,778	329,007	1.25	2.81	\$147.48	\$133.79	\$16.65	\$28.65
Sep 2020	261,176	155,672	338,785	1.30	2.80	\$146.44	\$134.04	\$15.68	\$26.30
Oct 2020	263,509	168,565	358,451	1.36	2.81	\$141.86	\$130.35	\$15.11	\$23.62
Nov 2020	263,459	156,773	331,197	1.26	2.79	\$150.13	\$138.43	\$13.99	\$23.51
Dec 2020	263,076	153,977	355,642	1.35	2.97	\$152.62	\$141.19	\$14.64	\$25.01
Jan 2021	262,533	156,668	314,053	1.20	2.72	\$144.83	\$122.09	\$27.20	\$45.58

***"Allow Amt" is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.*

****"Member Cost per Script" is the average net amount paid per prescription filled per member (Net Pay Rx/Members)*

****"Patient Cost per Script" is the average net amount paid per prescription filled per Patients (Net Pay Rx/Patients)*

Prescription Drug Utilization *(continued)*

The following Top 25 Drug Analysis is based on Incurred Pharmacy Claims from Jan 2021.

Prev Rank	Curr Rank	Product Name*	Brand/Generic	Therapeutic Class General	Net Pay Rx	Net Pay Rx as % of All Drugs	Scripts Rx	Net Pay Per Day Supply Rx	Patients Rx
1	1	HUMIRA	Single source brand	Immunosuppressants	\$3,572,069.31	9.47%	424	\$211.69	410
2	2	STELARA	Single source brand	Immunosuppressants	\$1,711,646.31	4.54%	89	\$294.76	92
3	3	TRULICITY	Single source brand	Hormones & Synthetic Subst	\$1,015,268.09	2.69%	1,025	\$26.77	994
5	4	SAXENDA	Single source brand	Hormones & Synthetic Subst	\$927,797.92	2.46%	760	\$35.87	765
4	5	ENBREL	Single source brand	Immunosuppressants	\$896,712.19	2.38%	99	\$183.30	96
7	6	FARXIGA	Single source brand	Hormones & Synthetic Subst	\$790,297.61	2.09%	1,042	\$15.52	1,040
10	7	JARDIANCE	Single source brand	Hormones & Synthetic Subst	\$705,157.09	1.87%	935	\$16.04	935
6	8	JANUVIA	Single source brand	Hormones & Synthetic Subst	\$703,068.66	1.86%	1,011	\$14.32	1,004
11	9	TRIKAFTA	Multisource generic	Respiratory Tract Agents	\$610,103.02	1.62%	28	\$778.19	25
9	10	NOVOLOG	Single source brand	Hormones & Synthetic Subst	\$595,448.38	1.58%	532	\$25.04	539
12	11	NOVOLOG FLEXPEN	Single source brand	Hormones & Synthetic Subst	\$540,997.33	1.43%	553	\$22.26	549
15	12	DUPIXENT	Single source brand	Immunosuppressants	\$512,554.58	1.36%	207	\$84.75	192
-	13	XARELTO	Single source brand	Blood Form/Coagul Agents	\$488,540.18	1.29%	834	\$13.65	828
18	14	ROSUVASTATIN	Multisource generic	Cardiovascular Agents	\$486,045.30	1.29%	3,083	\$2.60	3,095
20	15	OZEMPIC 1 MG DOSES	Single source brand	Hormones & Synthetic Subst	\$485,503.42	1.29%	459	\$26.09	451
23	16	OZEMPIC 0.25 MG OR 0.5 MG DOSES	Single source brand	Hormones & Synthetic Subst	\$446,540.50	1.18%	433	\$24.90	436
-	17	BASAGLAR KWIKPEN	Single source brand	Hormones & Synthetic Subst	\$442,932.98	1.17%	895	\$11.00	890
24	18	SKYRIZI	Single source brand	Immunosuppressants	\$423,376.66	1.12%	27	\$207.13	26
14	19	VICTOZA	Single source brand	Hormones & Synthetic Subst	\$420,448.36	1.11%	369	\$27.22	368
13	20	COSENTYX	Single source brand	Immunosuppressants	\$414,672.89	1.10%	66	\$187.47	63
22	21	GILENYA	Single source brand	Misc Therapeutic Agents	\$405,378.12	1.07%	22	\$281.51	21
21	22	OTEZLA	Single source brand	Misc Therapeutic Agents	\$399,786.22	1.06%	113	\$94.85	113
25	23	TALTZ	Single source brand	Immunosuppressants	\$324,245.71	0.86%	46	\$206.79	50
-	24	TREMFYA	Single source brand	Immunosuppressants	\$317,638.65	0.84%	31	\$190.66	30
-	25	BREO ELLIPTA	Single source brand	Hormones & Synthetic Subst	\$278,137.78	0.74%	787	\$11.05	802

*"Product Name" includes all strengths/formulations of a drug.

Prescription Drug Utilization *(continued)*

In summary, the top 25 drugs represent 4.47% of total scripts and 47.47% of total Pharmacy expenditures.

Summary	Net Pay Rx	Scripts Rx	Days Supply Rx
Top Drugs	\$17,914,367	13,870	643,717
All Product Names	\$37,736,330	310,294	12,663,115
Top Drugs as Pct of All Drugs	47.47%	4.47%	5.08%

Utilization

The top 25 clinical conditions based on Incurred Medical Claims for Jan 2021.

Prev Rank	Curr Rank	Clinical Condition	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER	Patients Med	Net Pay Per Pat Med
1	1	Prevent/Admin Hlth Encounters	\$6,489,876	\$36,517	\$6,445,357	0.00	0.00	1481.60	0.46	38,572	\$168.25
13	2	Infections - Respiratory, NEC	\$5,343,935	\$3,518,657	\$1,820,275	6.58	4.68	310.45	23.68	7,603	\$702.87
5	3	Infections, NEC	\$4,918,713	\$2,643,109	\$2,271,401	0.46	6.90	701.44	3.89	19,067	\$257.97
2	4	Chemotherapy Encounters	\$3,545,562	\$227,788	\$3,317,774	0.64	3.00	1.78	0.00	312	\$11,363.98
3	5	Osteoarthritis	\$2,572,364	\$283,201	\$2,289,162	0.37	1.13	129.49	0.32	2,640	\$974.38
7	6	Coronary Artery Disease	\$2,246,195	\$1,473,390	\$772,805	1.51	4.15	23.54	2.01	672	\$3,342.55
8	7	Pregnancy without Delivery	\$2,171,171	\$1,780,464	\$390,707	0.41	3.33	85.02	4.66	1,826	\$1,189.03
4	8	Signs/Symptoms/Oth Cond, NEC	\$1,998,530	\$414,119	\$1,567,572	0.73	8.25	379.06	8.36	13,908	\$143.70
14	9	Cardiac Arrhythmias	\$1,693,158	\$713,286	\$979,819	0.64	2.93	33.69	1.78	1,039	\$1,629.60
10	10	Gastroint Disord, NEC	\$1,622,359	\$593,807	\$1,028,488	1.14	5.44	115.37	11.38	3,555	\$456.36
17	11	Newborns, w/wo Complication	\$1,580,473	\$1,491,345	\$89,080	7.91	3.16	9.32	0.14	295	\$5,357.54
6	12	Spinal/Back Disord, Low Back	\$1,381,332	\$479,066	\$902,209	0.27	2.67	524.37	2.83	6,553	\$210.79
20	13	Radiation Therapy Encounters	\$1,329,069	\$0	\$1,329,069	0.00	0.00	2.24	0.00	72	\$18,459.30
11	14	Respiratory Disord, NEC	\$1,317,655	\$366,163	\$913,625	0.18	1.75	71.63	9.00	3,056	\$431.17
9	15	Arthropathies/Joint Disord NEC	\$1,277,929	\$134,118	\$1,143,646	0.09	3.00	551.43	4.11	7,674	\$166.53
15	16	Condition Rel to Tx - Med/Surg	\$1,272,121	\$879,838	\$391,674	1.51	5.00	6.49	1.69	550	\$2,312.95
16	17	Diabetes	\$1,259,869	\$324,527	\$935,102	1.87	7.27	213.50	1.92	5,494	\$229.32
-	18	Multiple Sclerosis	\$1,253,089	\$0	\$1,250,553	0.00	0.00	3.79	0.05	136	\$9,213.89
12	19	Cancer - Breast	\$1,045,746	\$38,125	\$1,004,747	0.05	4.00	24.68	0.05	600	\$1,742.91
22	20	Neurological Disorders, NEC	\$1,025,588	\$493,512	\$531,998	0.64	12.79	65.27	0.73	1,415	\$724.80
18	21	Spinal/Back Disord, Ex Low	\$852,400	\$157,309	\$695,091	0.23	2.40	488.90	1.87	5,857	\$145.54
19	22	Cerebrovascular Disease	\$850,412	\$651,238	\$191,932	0.78	8.18	8.09	1.05	274	\$3,103.70
23	23	Cardiovasc Disord, NEC	\$829,315	\$176,526	\$649,721	0.32	8.57	71.81	8.27	2,372	\$349.63
-	24	Cancer - Leukemia	\$803,558	\$503,380	\$300,177	0.18	14.50	3.25	0.00	139	\$5,780.99
-	25	Hypertension, Essential	\$787,477	\$457,730	\$329,488	0.73	8.31	252.22	2.83	6,206	\$126.89

NOTE: Medical payments represent only the payments made for the specified condition.

Utilization *(continued)*

In Summary, the top clinical conditions represent more than 68.30% of total Paid Medical Claims for all clinical conditions.

Summary	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER
Top Clinical Conditions	\$49,467,895	\$17,837,219	\$31,541,472	27.24	4.86	5,558.43	91.10
All Clinical Conditions	\$76,259,897	\$26,116,253	\$49,939,553	55.90	3.54	9,547.55	165.80
Top Clinical Conditions as Pct of All Clinical Conditions	64.87%	68.30%	63.16%	48.73%	137.00%	58.22%	54.95%

Claims Lag Analysis

The following claims lag information is based on Incurred Medical Claims from Jan 2021.

Plan	Number of Medical Claims	Avg Days Lag Per Claim	% Claims Paid Within 30 Days	% Claims Paid Within 60 Days	% Claims Paid Within 90 Days
LivingWell CDHP	413,201	21	82.58%	95.60%	99.55%
LivingWell PPO	254,192	21	82.94%	95.90%	99.54%
LW Limited High Deductible	4,340	30	74.28%	93.39%	98.47%
LivingWell Basic CDHP	23,962	21	79.88%	94.35%	99.33%
Missing	1,318	30	64.04%	94.76%	98.50%
All Plans	697,013	21	82.47%	95.62%	99.52%

**Missing means the claims could not be tagged to a specific plan.*

Claims Lag Analysis *(continued)*

The following claims lag information is based on all claims (**Medical and Pharmacy**) incurred and paid during the most recent rolling year.

	Month Paid					
Service Month	May 2020	Jun 2020	Jul 2020	Aug 2020	Sep 2020	Oct 2020
Feb 2020	\$3,907,619.31	\$1,233,919.73	\$708,677.70	\$380,456.86	\$251,378.09	\$25,828.10
Mar 2020	\$13,672,422.77	\$3,858,430.27	\$836,886.16	\$1,055,698.41	\$261,195.12	\$186.54
Apr 2020	\$30,244,270.20	\$13,491,445.67	\$2,766,982.47	\$1,793,724.34	\$426,393.68	\$498,999.92
May 2020	\$47,304,682.97	\$46,001,533.49	\$15,902,016.71	\$3,805,542.61	\$1,649,623.34	\$945,670.60
Jun 2020	\$25,477.07	\$60,391,797.03	\$47,451,988.36	\$22,131,860.63	\$4,678,916.21	\$2,752,053.40
Jul 2020	\$0.00	\$39,803.23	\$55,056,794.34	\$56,674,274.17	\$22,423,583.39	\$5,667,643.45
Aug 2020	\$0.00	\$0.00	\$5,771.88	\$60,905,767.75	\$45,966,820.78	\$22,140,051.62
Sep 2020	\$0.00	\$0.00	\$0.00	\$32,800.91	\$58,123,082.49	\$46,839,039.09
Oct 2020	\$0.00	\$0.00	\$0.00	\$0.00	\$41,773.19	\$57,971,174.12
Nov 2020	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,891.97
Dec 2020	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Jan 2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

	Month Paid					
Service Month	Nov 2020	Dec 2020	Jan 2021	Feb 2021	Mar 2021	Apr 2021
Feb 2020	\$4,030.04	(\$13,032.66)	\$268,448.74	\$385,300.23	(\$52,070.23)	(\$3,791.43)
Mar 2020	\$474,259.16	\$18,131.45	\$53,714.98	\$161,121.88	\$4,153.21	\$50,295.70
Apr 2020	\$180,709.81	\$54,147.92	\$51,804.03	(\$141,911.32)	(\$96,813.12)	\$18,967.34
May 2020	\$587,972.00	\$446,471.35	\$287,644.03	\$356,821.10	(\$317,683.83)	\$178,848.55
Jun 2020	\$856,990.55	\$743,070.03	\$430,864.75	\$365,700.68	\$9,455.29	\$99,931.22
Jul 2020	\$2,141,609.06	\$912,808.49	\$922,225.75	\$430,877.56	\$272,886.55	\$75,993.86
Aug 2020	\$5,211,529.71	\$3,590,235.32	\$1,836,078.33	\$577,539.31	\$845,530.02	\$29,043.37
Sep 2020	\$26,730,066.56	\$7,154,170.94	\$2,165,854.86	\$2,076,893.39	\$951,080.94	\$261,054.24
Oct 2020	\$53,126,749.52	\$27,158,739.72	\$5,848,864.81	\$2,573,122.86	\$1,031,753.50	\$924,818.91
Nov 2020	\$54,250,795.76	\$61,952,929.19	\$14,028,641.73	\$5,790,067.80	\$3,441,330.30	\$1,420,538.27
Dec 2020	\$24,549.70	\$69,483,990.28	\$54,812,368.34	\$25,170,372.21	\$8,488,407.50	\$2,620,515.19
Jan 2021	\$0.00	\$21,355.71	\$43,353,436.23	\$41,491,445.73	\$23,390,201.12	\$5,485,168.60

Claims Distribution Based on Age/Gender

The following is based on Incurred Medical and Pharmacy Claims from Jan 2021.

	Female			Male		
Age Group	Members Avg	Net Pay Med and Rx	Net Pay Per Member	Members Avg	Net Pay Med and Rx	Net Pay Per Member
Ages < 1	1,015	\$718,947.62	\$708.32	1,043	\$1,592,081.65	\$1,526.44
Ages 1-4	4,992	\$1,010,973.81	\$202.52	5,301	\$649,824.30	\$122.59
Ages 5-9	7,661	\$722,543.38	\$94.31	8,030	\$1,104,743.57	\$137.58
Ages 10-14	9,293	\$1,148,594.35	\$123.60	9,728	\$1,686,134.47	\$173.33
Ages 15-17	6,282	\$1,424,808.56	\$226.81	6,403	\$1,175,785.84	\$183.63
Ages 18-19	4,048	\$1,042,153.66	\$257.45	4,174	\$606,197.39	\$145.23
Ages 20-24	10,280	\$2,888,444.77	\$280.98	9,832	\$1,908,327.41	\$194.09
Ages 25-29	8,289	\$2,728,222.67	\$329.14	4,960	\$963,733.43	\$194.30
Ages 30-34	8,842	\$3,167,599.29	\$358.24	5,062	\$1,041,843.32	\$205.82
Ages 35-39	10,838	\$4,313,107.19	\$397.96	6,357	\$1,518,367.64	\$238.85
Ages 40-44	12,365	\$5,609,600.95	\$453.67	7,495	\$2,368,217.10	\$315.97
Ages 45-49	13,841	\$6,985,014.61	\$504.66	8,774	\$4,158,660.71	\$473.98
Ages 50-54	15,187	\$9,187,879.93	\$604.98	9,865	\$5,852,145.68	\$593.22
Ages 55-59	16,711	\$10,972,832.68	\$656.62	10,661	\$7,689,338.35	\$721.26
Ages 60-64	18,744	\$14,090,877.25	\$751.75	11,310	\$10,709,738.45	\$946.93
Ages 65-74	2,592	\$2,265,054.16	\$873.86	2,225	\$2,960,649.53	\$1,330.63
Ages 75-84	155	\$90,981.01	\$586.97	159	\$242,865.67	\$1,527.46
Ages 85+	2	\$455.12	\$227.56	9	\$5,705.75	\$633.97
Total	151,137	\$68,368,091.01	\$452.36	111,388	\$46,234,360.26	\$415.07

Allowed Amount Distribution by Member Count

The following table shows the distribution of members for whom the amounts of charges within the specified ranges were allowed. The data appears for the years of 2014—2020 and year to date for 2021.

Allowed Amount	2014	2015	2016	2017	2018	2019	2020	2021
less than 0.00	22	4	2	1	5	18	8	0
\$0.00 - \$499.99	66,180	72,760	72,608	71,180	69,962	67,319	72,635	118,726
\$500.00 - \$999.99	39,137	39,862	40,982	41,563	42,897	41,384	41,362	16,046
\$1,000.00 - \$1,999.99	43,065	41,247	40,963	42,085	43,484	43,531	42,184	9,912
\$2,000.00 - \$4,999.99	51,911	49,217	48,716	49,648	50,026	50,766	47,710	6,716
\$5,000.00 - \$9,999.99	29,515	26,834	27,302	26,817	27,360	27,910	25,233	2,438
\$10,000.00 - \$14,999.99	12,825	11,369	11,647	12,107	12,430	12,816	11,956	1,024
\$15,000.00 - \$19,999.99	6,755	5,605	6,152	6,389	6,799	7,366	7,103	629
\$20,000.00 - \$29,999.99	6,374	5,612	5,909	6,229	6,841	7,145	6,990	607
\$30,000.00 - \$49,999.99	5,272	4,475	4,841	5,064	5,389	5,958	5,601	353
\$50,000.00 - \$74,999.99	2,520	2,225	2,347	2,673	2,779	3,001	2,862	110
\$75,000.00 - \$99,999.99	1,037	944	1,115	1,201	1,329	1,443	1,407	48
\$100,000.00 - \$149,999.99	846	777	886	959	1,046	1,174	1,209	41
\$150,000.00 - \$199,999.99	344	320	330	369	442	502	479	9
\$200,000.00 - \$249,999.99	179	148	174	168	206	216	257	2
over \$249,999.99	326	231	252	292	318	395	454	7
Total	266,308	261,630	264,226	266,745	271,313	270,944	267,450	156,668

Summary of Enrollment and Claims

The following provides a summary of members, Incurred Medical Claims and Incurred Pharmacy Claims for the most recent rolling year.

Time Period	Members	Net Pay Med and Rx	Net Pay Med	Net Pay Rx	Claims Paid	Claims Paid Med	Scripts Rx
Feb 2020	265,107	\$119,048,649.61	\$80,788,381.76	\$38,260,267.85	655,753	299,396	348,438
Mar 2020	265,515	\$118,320,143.99	\$71,798,555.15	\$46,521,588.84	628,837	239,102	383,205
Apr 2020	266,038	\$96,465,727.98	\$53,435,190.86	\$43,030,537.12	464,205	143,856	314,394
May 2020	266,132	\$117,186,073.77	\$75,774,390.57	\$41,411,683.20	537,861	218,807	312,557
Jun 2020	265,885	\$139,853,827.43	\$94,022,355.94	\$45,831,471.49	643,654	299,254	336,906
Jul 2020	264,578	\$144,530,932.61	\$99,544,637.34	\$44,986,295.27	675,890	328,687	339,611
Aug 2020	262,892	\$141,251,085.12	\$97,233,896.22	\$44,017,188.90	641,171	304,499	329,007
Oct 2020	263,509	\$148,792,151.19	\$102,066,402.53	\$46,725,748.66	702,484	335,854	358,451
Sep 2020	261,176	\$144,383,994.68	\$98,974,244.66	\$45,409,750.02	649,722	302,791	338,785
Nov 2020	263,459	\$141,005,165.26	\$95,157,255.26	\$45,847,910.00	647,960	309,304	331,197
Dec 2020	263,076	\$161,501,281.96	\$111,287,535.39	\$50,213,746.57	685,648	322,384	355,642
Jan 2021	262,533	\$114,602,451.27	\$76,259,896.51	\$38,342,554.76	637,160	315,607	314,053

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims (includes Medical and Pharmacy) by rolling year.

Time Period	Members	Total Medical and Rx Claims	Total Medical Claims	Total Rx Claims
Feb 2020 - Jan 2021	264,158	\$1,593,797,873	\$1,063,188,552	\$530,609,321
Feb 2019 - Jan 2020	263,840	\$1,627,832,373	\$1,136,428,321	\$491,404,052
% Change (Roll Yrs)	0.12%	-2.09%	-6.44%	7.98%

Appendix A

The Department of Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees' Health Plan for members of the Kentucky Group Health Insurance Board (KGHIB).

It is the Department's intent to update this information on a monthly basis in an effort to provide current information about Kentucky's Health Insurance Program.

This report is compiled using Advantage Suite, which is DEI's health insurance information management system. IBM Watson Health warehouses enrollment and claims data on behalf of the KEHP. Enrollment data is provided by DEI while claims data is provided by KEHP's Medical and Pharmacy administrators

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding and dropping dependents, marriage, divorce, Medicare eligibility, etc. Therefore, Advantage Suite is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2019, Advantage Suite processed enrollment information for a total of 263,771 members as well as 8,140,840 claims (3,671,772 Medical claims and 4,372,489 prescriptions) from different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Advantage Suite.

Appendix B—Definitions

- ***Allowed Amount*** is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- ***Carrier*** refers to claims listed by carrier. (Please note that CVS data is designated as Anthem).
- ***Days Supply*** is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- ***Employee*** represents an individual eligible to participate in KEHP as a retiree, or by being employed by one of the agencies that participate with KEHP (example: state employee, school board, quasi agency, etc.). Employee may also be referred to as “planholder” or “contracts”. Please note that Advantage Suite deals with Cross-Reference plans uniquely. Although there are in fact two “employees” Advantage Suite can only designate the planholder as an employee. Therefore, the Cross-Reference spouse is considered a dependent and all claims and utilization data related to that spouse is counted as a “member”.
- ***Generic Efficiency*** means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- ***Group*** is Kentucky Retirement System (KRS), Kentucky Teachers’ Retirement System (TRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, and Quasi/Local Governments).
- ***Incurred Claims*** refer to paid amounts for claims that were incurred in a specified timeframe.
- ***IP*** refers inpatient procedures and/or claims.
- ***LOS*** refers to length of stay of an acute admission.
- ***Mail Order*** is computed as any script filled with a “days supply” of more than 30 days, regardless of the physical location where the prescription was filled.
- ***Member*** includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as “covered lives”.
- ***Member Cost per Script*** is the average net amount paid per prescription filled per member (Net Pay Rx/Members).
- ***Net Payment*** is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- ***OOP*** is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- ***OP*** refers to outpatient procedures and/or claims.
- ***OP Rad*** refers to outpatient radiology claims an/or patients.
- ***Paid Claims*** specify the paid amount for claims regardless of when the claims may have been incurred.
- ***Patient Cost per Script*** is the average net amount paid per prescription filled per patient (Net Pay Rx/Patients).
- ***Patients*** is the unique count of members who received facility, professional, or pharmacy services.

Appendix B—Definitions *(continued)*

- ***Plan*** is Standard PPO, Standard CDHP, LivingWell Basic CDHP, LW High Deductible Plan, LivingWell PPO and LivingWell CDHP.
- ***Rcnt SGovt*** refers to recent State Government benchmarks.
- ***Rcnt US*** refers to recent US national benchmarks.
- ***Retail*** is computed as any script filled with a “days supply” of 30 days or less, regardless of the physical location where the prescription was filled.